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| **Organization Name:** | | |
| **1** | Does the entity use a third party for security?  If so, which type:  Public, Local Law Enforcement Agency  Private Security Firm | Yes  No |
| **2** | When security is contracted to a third party, is the contractor’s general liability / law enforcement professional liability policy required to name the entity as an additional insured?  **If yes**, does the third party maintain a minimum limit of liability coverage and indemnify the entity?  **If yes**, indicate the minimum limit of liability of general / policy professional liability coverage your entity requires: | Yes  No  Yes  No  $  (Per occurrence)  $  (Per aggregate) |
| **3** | Do security personnel have arresting authority? | Yes  No |
| **4** | If there is employed armed security, are they trained and/or re-certified annually to the standards required for public sector law enforcement for use of weapons? | Yes  No |
| **5** | Are criminal background checks and psychological reviews provided for all security staff?  **If yes**, how often are these checks and reviews completed?  **If no**, explain? | Yes  No        Months |
| **6** | Do security personnel store weapons on premises? | Yes  No |
| **7** | Do any other faculty, staff, or employees carry or store weapons on premises?  **If yes**, please provide a copy of the Weapons Policy. | Yes  No |
| **8** | Does the entity have emergency call boxes located throughout the premises that are connected directly to security or police? | Yes  No |
| **9** | Does the entity utilize building mapping programs? | Yes  No |
| **10** | Are there procedures in place to make sure that appropriate contact information is updated annually and shared with law enforcement and first responders? | Yes  No |
| **11** | Does the entity have a Safety Committee in place at each building similar to WAC 296-800-130? | Yes  No |
| **If the entity is a school, please respond to the questions below.** | | |
| **12** | Does the school follow the recommendations of RCW 9.41.280 by not permitting open and/or concealed carrying of firearms on any premises and by placing “Gun Free Zone” signage conspicuously on school buildings? | Yes  No |
| **13** | Does the school conduct annual table-top drills with local law enforcement and/or first responders? | Yes  No |
| **14** | Has the school completed a safety analysis (CPTED or other) to survey the school facilities from an external threat, active-shooter, or other perspective? | Yes  No |
| **15** | Does the school implement safe schools plans in conjunction with their local emergency response agencies similar to those recommended in RCW 28A.320.125?" | Yes  No |

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| --- | --- | --- |
| **Signature:** | **Title:** | **Date:** |

**Completed Applications Can Be Submitted To:**

**Byron Riche Phone: 800-407-2027**

**Clear Risk Solutions Fax: 509-754-3406**

**159 BASIN STREET SW PMB #206** [**briche@chooseclear.com**](mailto:briche@chooseclear.com)

**Ephrata, WA 98823**